Attorney's Docket No.: 17737-004US1 / 3704US

## COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

N/A

My residence, post office address and citizenship are as stated below next to my name.

which a pater	t is sought on	the invention entit	led <u>A CULTURE M</u>	bject matter IEDIUM A	which is claimed and for ND A METHOD FOR
<b>DETECTIO</b>	<u>N OF PARAS</u>	<u>ITES</u> , the specific	ation of which:		
[] [X]		led ontional Application	·		o on <u>10 February 2004,</u> and
I here specification,	eby state that I including the	have reviewed and claims, as amende	d understand the con d by any amendmen	tents of the a	above-identified above.
I ack	nowledge the o	luty to disclose in ith Title 37, Code	formation which is π of Federal Regulation	naterial to thons, §1.56(a)	e examination of this
foreign applied PCT international America, listed certificate of	cation(s) for pa ional application ed below, and PCT internation	tent or inventor's on that designated I have also identification on	certificate listed belo at least one country ied below any foreig	ow and so id other than th n application by us or our	n for patent or inventor's legal representatives or y is claimed.
Cou	ntry	Number	Filing Da		Priority Claimed
Aust	tralia	2003900553	10 February	2003	Yes
I hereby claim benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below:					
		Application No.	<u>Filin</u>	g Date	<u></u>
		N/A			
I hereby claim the benefit under Title 35, United States Code, §120 of any Untied States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:					
	Application	Serial No.	Filing Date	St	atus

Attorney's Docket No.: 17737-004US1

#### Combined Declaration and Power of Attorney Page 2 of 2 Pages

PCT Application No.	Filing Date	Status
N/A		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United Sates Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

I hereby appoint the following attorneys and agents, with full power of substitution and revocation, to prosecute this application and to transact all business in the United Sates Patent and Trademark Office connected therewith and request that all correspondence and telephone calls in respect to this application be directed to Stephanie Seidman, FISH & RICHARDSON, P.C., 12390 El Camino Real, San Diego, California 92130-2081.

Attorney	Reg. No.	
Stephanie L. Seidman	33,779	
Fred C. Hernandez	41,832	
Paula K. Schoeneck	39,362	
Frank J. Miskiel	53,332	
Scott C. Harris	32,030	

Direct all telephone calls to STEPHANIE SEIDMAN at telephone number (858) 678-5070.

Direct all correspondence to the following:

**PTO Customer Number** 

Full Name of Inventor:

Thomas Julius B

Date:

Inventor's Signature:

Residence Address:

Australian

New South Wales 2154, Australia

Citizenship:

Post Office Address:

2-4 Conwood Place, Castle Hill, New South Wales 2154, Australia

10516457.doc

Prac	títioner's Docket	No	PATENT
	IN THE	UNITED STATES PAT	ENT AND TRADEMARK OFFICE
	In re application o	f:	
	ication No.:		Group No.:
Filed		orodu "A gultura madiu	Examiner:  um and a method for detection of parasites"
rui.	· Thomas Julius <u>B</u>	orody A culture mediu	in and a method for detection of parasites
[ ] P:	atent No.:	I	Issue Date:
*NOT		nventor(s) and title also for pate tion number and filing date, and	nt Where statement is with respect to a maintenance fee payme I add Box M. Fee to address.
:	STATEMENT CI	LAIMING SMALL ENT	ITY STATUS (37 CFR 1.9(c-f) and 1.27(b-d))
With	respect to the inve		
		ication filed herewith.	<b>7</b> 3. 3
	[ ] application	no	filed filed
	PC   Interna	issued	_ med
Ι.	IDENTIFICA'	TION AND RIGHTS AS	A SMALL ENTITY
l here	by state that I am		
	oy blace that I back	(complete either (a,	), (b), (c) or (d) below)
(a)	Independent In	ventor	
	[ X ]		dent inventor, and that I qualify as an independe
			CFR 1.9(c), for purposes of paying reduced fees und
		Trademark Office.	of Title 35, United States Code, to the Patent ar
(b)	Noninventor Su	pporting a Claim by Anoth	ner
• /	[ ]	making this statement to s	
Unite	d States Code. I he	reby state that I would qua	duced fees under Sections 41(a) and (b) of Title 3 alify as an independent inventor as defined in 37 CF
	) for purposes of pa nade the above ide		ections 41(a) and (b) of Title 35, United States Code, i
	` '	usiness Concern	
ck	• •		iness concern identified below:
/	identified below:	an official of the small busin	ness concern empowered to act on behalf of the conce
	racininea ociow:		

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Name of Con-	
that the above CFR 121.3-18 and (b) of Titl its affiliates, d the business of a full-time, pa are affiliates of	and e identified small business concern qualifies as a small business concern, as defined in 13 and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under Sections 41(a) e 35. United States Code, in that the number of employees of the concern, including those of loes not exceed 500 persons. For purposes of this statement, (1) the number of employees of oncern is the average over the previous fiscal year of the concern of the persons employed or at-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns of each other when either, directly or indirectly, one concern controls or has the power to her, or a third party or parties controls or has the power to control both.
(d) Non-Prof [ ]	it Organization an official empowered to act on behalf of the nonprofit organization identified below:
Name of Orga Address of Or	
TYPE OF OR [	GANIZATION University or Other Institution of Higher Education Tax Exempt Under Internal Revenue Service Code (26 USC 501(a) and 501(c) (3))
[]	Nonprofit Scientific or Educational Under Statute of State of the United States of America (Name of State) (Citation of Statute)
[]	Would Qualify as Tax Exempt Under Internal Revenue Service Code (26 USC 501(a) and 501(c) (3)), if Located in the United States of America
[ ]	Would Qualify as Nonprofit Scientific or Educational Under Statute of State of the United States of America, if Located in the United States of America (Name of State) (Citation of Statute)
and that the no CFR 1.9(e), fo Code.	onprofit organization identified above qualifies as a nonprofit organization, as defined in 37 or purposes of paying reduced fees under Sections 41(a) and (b) of Title 35, United States
II. OWN	ERSHIP OF INVENTION BY DECLARANT
l herel dentified	by state that rights under contract or law remain with and/or have been conveyed to the above
[ X ] ¡ (item (a) or (b)	

EXCEPT, that if the rights held are not exclusive, each individual, concern or organization having rights to the invention is listed below\* and no rights to the invention are held (1) by any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, (2) any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or (3) a nonprofit organization under 37 CFR 1.9(e).

	[ X ]	-	on, concern, or organization erns or organizations listed below*	
*NOTE. Separate statements are required from each named person, concern or organization having rights to the in to their status as small entities. (37 CFR 1.27)				
Full Na				
	[] IND	DIVIDUAL	[ ] SMALL BUSINESS CONCERN	[ ] NONPROFIT ORGANIZATION
Full Na Address				
	[ LINI	DIVIDUAL	[ 1 SMALL BUSINESS CONCERN	[ ] NONPROFIT ORGANIZATION

as

## III. ACKNOWLEDGEMENT OF DUTY TO NOTIFY PTO OF STATUS CHANGE

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

### IV. DECLARATION

(check the following item, if desired)

- NOTE: The following verification statement need not be made in accordance with the rules published on October 10, 1997. 62 Fed. Reg. 52131, effective December 1, 1997.
- NOTE: AThe presentation to the Office (whether by signing, filing, submitting, or later advocating) of any paper by a party, whether a practitioner or non-practitioner, constitutes a certification under '10.18(b) of this chapter. Violations of '10.18(b)(2) of this chapter by a party, whether a practitioner or non-practitioner, may result in the imposition of sanctions under '10.18(c) of this chapter. Any practitioner violating '10.18(b) may also be subject to disciplinary action. See '10.18(d) and 10.23(c)(15). 37 CFR 1.4(d)(2).
- [X] I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

# v. signatures

(complete only (e) or (f) below)

(e) NOTE: All inventors must sign the statement.	
Thomas Julius Borody Name of Inventor  Date:	12/05/08
Name of Inventor  Date:	
Name of Inventor  Date:	
(add lines for any additional inve	ntors who must sign)
or	
(f)  NOTE: The title of the person signing on behalf of a concern or no	onprofit organization should be specified.
Name of Person Signing	
Title of Person (if signing on behalf of a concern of	non-profit organization)
Address of Person Signing	
SIGNATURE	DATE